

KBN CONNECTION

Spring 2021
Edition 67



**Continuing Competency/
Continuing Education
Frequently Asked
Questions**

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**Summary of COVID-19
Emergency Measures and
Recent or Pending
Regulatory Changes**

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KBN MISSION

The Kentucky Board of Nursing protects the well-being of the public by development and enforcement of state laws governing the safe practice of nursing, nursing education, and credentialing.

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Kelly Jenkins MSN, RN, NE-BC

EDITOR:

Michelle Grant Rudovich, JD
Deputy Executive Director

PUBLICATION COORDINATOR:

Eric Velazquez

PUBLICATION GUIDELINES

Articles from guest authors may be submitted for publication in the KBN Connection. Priority will be given to subject matter regarding Kentucky nurses, dialysis technicians, and licensed certified professional midwives. Articles should not exceed 1,000 words in length unless approved by the Editor. **Contact**

KBN Connection Editor for more detailed instructions.

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KBN Connection circulation includes 90,000 licensed nurses, nursing students, certified professional midwives and dialysis technicians in Kentucky.

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STATISTICS CORNER

As of APRIL 30, 2021
KBN records show:

RN ACTIVE: 73,253

LPN ACTIVE: 13,282

**ADVANCED PRACTICE
REGISTERED NURSES (APRN)
LICENSES: 10,546**

**DIALYSIS TECHNICIAN (DT)
CREDENTIALS: 706**

SANE ACTIVE: 318

**CERTIFIED PROFESSIONAL
MIDWIVES (CPM)
ACTIVE LICENSES: 24**

Meet your Kentucky Board of Nursing Board Members



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2018-2022



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Mandi Walker, RN
Louisville
2019-2022



ROBYN WILCHER, RN
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2017-2021



President's Message

Greetings! Serving on the Board of Nursing is a highlight of my career as I have the great fortune of meeting nurses from all across the state and am constantly learning. I would encourage you to consider this type of service to the Commonwealth and profession at some point during your career. The Board has 16 appointed members that serve staggered 4-year terms and its composition includes consumer members, LPNs, RNs, and APRNs.

The members represent different areas of the state and varied nursing backgrounds including various clinical practice and education settings. Sometimes members are re-appointed to serve additional terms.

I am often asked how I got on the Board of Nursing and what does the role of board member entail. The key to getting on the board is being involved in professional organizations. Certain organizations including Kentucky Nurses' Association (KNA); Kentucky Licensed Practical Nurses Organization Incorporated; Kentucky Organization of Nurse Leaders, an affiliate of the Kentucky Hospital Association; Leading Age Kentucky; and the Kentucky Association of Health Care Facilities submit candidate nominations to the Governor. Each time an organization has an opening on the board they will submit multiple nominees for consideration and ultimately those selected for appointment are chosen by the Governor. Citizens who are not nurses and wish to serve can apply to the Governor's Office. Through my involvement in KNA I was aware of open positions and completed an application. I was vetted by the KNA board and nominated to the Governor's Office.

After being appointed by the Governor, members take an oath and are sworn in during a public meeting of the Board. Board members participate in extensive orientation to learn about all of the branches and functions of the board, meet the staff, and other board members. An experienced board member mentors a new board member. In addition to participating in the full board meetings, board members are assigned to work on at least a couple of committees of the board. Committee assignments and designation of a Chair for each committee are determined by the President of the board and are guided by regulations that specific organizations have representation on particular committees and based on the experience and interest of board members.

Board members must put the mission of protecting the public first when considering any decision. It is natural for anyone to want to promote their own profession, specialty or organization they work for, but in order to fulfill the role of board member and be respected by board member colleagues one must set aside any affiliations and biases and keep their eye on what is best for protection of the public. When a conflict of interest occurs, the board member must recuse him or herself from voting. The decision to suspend a nurse's license or not allow a school of nursing to expand their reach due to shortage of clinical sites are not made without careful consideration and much deliberation among members. Members are asked to review many documents, sometimes hundreds or thousands of pages of information in preparation for committee and board meetings that occur each month. Members must be willing to speak up on matters that fall within their expertise, be willing to defer to others who have more expertise on some matters, and always listen to various perspectives and data to make informed decisions when they vote. They must be willing to support the decision made by majority vote to maintain a unified and collegial approach to the work of the board. Setting aside time for attendance and preparation to participate in all meetings of the board and its committees is crucial.

A handwritten signature in dark ink that reads "Jessica Wilson". The script is fluid and cursive.

Jessica Wilson, PhD, APRN, ANP-C
President, Kentucky Board of Nursing

Immediate Past Executive Director's Message

Dr. Jessica Estes served as Executive Director from 6/1/2019 to 1/31/2021 and Interim Executive Director from 2/1/2021 to 5/31/2021.



Greetings -

This is a bittersweet update, as it will be the last one I make as the Interim Executive Director for the Kentucky Board of Nursing. For those of you who have been following our social media, we advertised for an Executive Director after my December announcement of a move to Alaska. At this time in my life, it's an opportunity I could not pass up, as much as I hated to do it. You see, I love this role. It's been an amazing two years (despite the pandemic). There are so many reasons that I simply cannot list them all. I simply cannot imagine any role where you can participate in so many aspects of healthcare at one time. Each day, I have the opportunity to engage licensees, stakeholders, and the public. It has been so much fun.

All of that said, Alaska is where I am supposed to be, it's all falling in place. I will leave the Board of Nursing in good hands, and transfer my responsibilities to the former Board President, Kelly Jenkins. Kelly was Board President when I was hired. I always think it's interesting to see how things come full circle. I will have a brief time period of overlap with her, and will then hand-off the responsibility of leading.

I want to thank the staff at KBN for two years of hard work - they never missed a moment in the pandemic transition. I want to thank our Board for handling all of the regulation changes we've put forth in the last two years (and reading volumes of material). I want to thank the stakeholders for embracing our participation in their ventures. I also want to thank our licensees and credential holders for the pandemic work they've done. It truly has been two wonderful years.

Sincerely,

Jessica L. Estes, DNP, APRN-NP

Immediate Past Executive Director, Kentucky Board of Nursing

Upcoming 2021 KBN Board Meeting and Committee Meeting Schedule

Board Meetings:

June 17
August 19
October 14
December 16
*Meetings start at 10:00am

Consumer Protection Committee Meetings:

*September 16
November 18
*Meetings start at 11:00am

Practice Committee Meetings:

September 17
November 19
*Meetings start at 9:00am

Governance Committee Meetings:

September 16
November 18
*Meetings start at 10:00am

Education Committee Meetings:

September 16
November 18
*Meetings start at 1:00pm

*Check the **KBN** website
www.kbn.ky.gov for schedule
updates and information about
how to access the meeting
virtually, when offered.

Executive Director's Message



Greetings -

I am very excited to join the Kentucky Board of Nursing as the Executive Director. The Kentucky Board of Nursing is committed to protecting the public by development and enforcement of state laws governing the safe practice, education, and credentialing of nurses, dialysis technicians, and licensed certified professional midwives. The KBN is the largest professional licensing agency in the Commonwealth and serves over 90,000 licensed nurse professionals, licensed certified professional midwives, and dialysis technicians. In addition, through a contract with CHFS, staff maintain the Kentucky Nurse Aide Registry of over 44,000 state registered nurse aides.

I have always been an advocate of developing the profession of nursing and ensuring nurses are able to practice to the full extent of their scope. My passion for regulation/legislation began at my first Kentucky Organization of Nurse Leaders (KONL) meeting and has continued to this day. I have served on the KONL Board as the Twin Lake District Director, KBN representative, and secretary.

My experience with the KBN began in 2011 when I had the opportunity to serve as a member of the Board (2011-2019), President of the Board, and on numerous Board committees (Credentials Review Panel, Consumer Protection Committee, Practice Committee, KBN Connection Editorial Panel). I look forward to bringing my experience as a member of the Board and my perspective as a nurse to the position. I have been a registered nurse for 29 years. Most recently, I have served as a Quality and Corporate Compliance Manager at Deaconess Henderson Hospital where I have focused on collaborating with interprofessional teams to drive and influence quality outcomes. Throughout my career, I have also focused on staff development and have worked as a nurse manager, assistant director of nursing, director of critical care services, chief nursing officer, and director of quality, nursing operations, magnet program, and case management.

As Executive Director, I plan to continue the progress made by the Board in advancing the professions of nurses, licensed certified professional midwives, and dialysis technicians. I would like to continue to pursue technology advancements in order to facilitate communication. I would also like to build on the success demonstrated by employees who have telecommuted during COVID-19 and evaluate the continued use of remote employees, which could provide career opportunities for nurses across the Commonwealth.

I would like to thank Dr. Jessica Estes for her commitment to the professions and her leadership during her tenure as Executive Director. While serving in this role, Dr. Estes was able to advance many of the Board's objectives including launching CE Broker and a social media campaign, transitioning the office to a largely paperless file system, implementing many online applications for the convenience of licensees, and bringing the regulation of certified professional midwives to fruition.

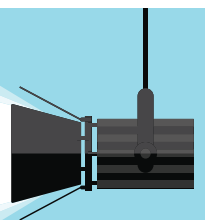
Finally, I would like to thank the Board for their faith in me and allowing me to serve in this role. I look forward to working with the board members and staff and building on the hard work and accomplishments of the Kentucky Board of Nursing. Most importantly, I look forward to serving the nurses, dialysis technicians, and licensed certified professional midwives in the Commonwealth of Kentucky.

Sincerely,

A handwritten signature in cursive script that reads "Kelly Jenkins".

Kelly Jenkins, MSN, RN, NE-BC
Executive Director, Kentucky Board of Nursing

Branch Spotlight: Professional Support Branch



This month we are spotlighting the great work of the Professional Support Branch. They work hard on a myriad of projects for the Board.

Michelle Gary *Practice Assistant and Continuing Competency Coordinator*

- Michelle holds a Bachelor's degree in Sociology and an Associate's degree in Paralegal Studies. She worked at the Kentucky Real Estate Commission for 21 years until she transferred to the KBN in 2017.
- Michelle is most commonly contacted by CE providers and licensees with questions about CE requirements. Michelle also serves as an assistant to the Practice Consultants with the Practice Committee, APRN Advisory Council, Dialysis Technician Advisory Council, and Certified Professional Midwives Advisory Council.
- MichelleA.Gary@ky.gov



Myra Goldman, MSN, APRN, FNP-C *Branch Manager, APRN Practice/Education Consultant*

- Myra holds a Master's degree from the University of Louisville as a Clinical Nurse Specialist in Maternal-Infant Nursing. She received a Post-Master's Certificate from Spalding University leading to an Advanced Practice Registered Nursing degree in Family Practice. In addition, Myra has over thirty years of experience in nursing education. She has taught at the undergraduate level in associate degree and baccalaureate degree programs. In addition, she has taught at the graduate level in programs that lead to an APRN. As an APRN she practiced in primary care, urgent care and acute/episodic care clinics.
- Licensees may contact Myra with questions about statutes, regulations, and education and/or practice related questions (APRN, RN, LPN, LCPM, DT and SANE)
- MyraK.Goldman@ky.gov



Valérie Jones, MSN, Ed., RN *Education Consultant*

- Valérie received her Master's Degree in Nursing Education from Indiana Wesleyan University, as well as her BSN in Nursing. Her associate degree in nursing was received from Jefferson Community College. She has previously held roles as nursing program clinical coordinator, nursing faculty, academic coach, and staff nurse. Her nursing career started in the CCU at U of L, where she worked for seven years. In addition, she has experience in home health, long term care, and med surge.
- Valérie primarily works with all programs of nursing that lead to practical and registered nurse licensure.
- Valerie.Jones@ky.gov



Amy Ninneman *Nursing Incentive Scholarship Program (NISF) Coordinator, Education Assistant*

- Amy holds a Master's degree in English. After completing her degree, she worked for two years in healthcare as a patient care coordinator for a fast-paced primary care serving vulnerable populations. She then spent three years working in Southampton, England, where she worked at a nonprofit and as a visiting academic at the University of Southampton.
- Amy often fields questions about the NISF. She is also involved with the education committee, faculty essentials, faculty audit, and analysis of NCLEX pass rates.
- Amy.Ninneman@ky.gov



Joy Pennington *Professional Consultant*

- Joy graduated with an Associate Degree from Southeast Kentucky CTC. She obtained her BSN degree and a Masters in Nursing Education from Chamberlain College of Nursing. She comes to the Kentucky Board of Nursing with eighteen years of experience in the field of nursing. She has worked as a surgical nurse in the operating room and cardiac catheterization recovery unit and in rural health nursing. Her time working in the area of rural health allowed her to gain knowledge and experience in the following areas: medical-surgical, nephrology, pulmonology, pediatrics and women's health. She has spent the past eleven years in education: seven years as a faculty member and four years as a program administrator.
- Licensees are most likely to contact Joy about nursing education.
- JoyR.Pennington@ky.gov



Kim Richmond, DNP, RNC-OB RN / LPN Nursing Practice Consultant

- Kim has been an RN for approximately a decade and has focused her career on working in high-risk obstetrics as a labor and delivery nurse, clinical research nurse, and adjunct faculty. She spent six years teaching clinically and didactically and has enjoyed mentoring new nurses and nursing students. She has an MSN in Nursing Education, a DNP focusing on global health and health policy, and is currently enrolled in a postmaster's FNP certificate program.
- Licensees are most likely to contact Kim with questions concerning RN, LPN, LCPM, and DT practice questions and standard of care questions; practice regulations, statutes, and advisory opinions; and dialysis training programs and SANE programs.
- Kim.Richmond@ky.gov



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CE Broker for KBN CE Tracking

Michelle Gary
Practice Assistant and Continuing
Competency Coordinator

The Kentucky Board of Nursing has partnered with CE Broker to be the Board's official continuing education tracking system. This program launched for all licensees on March 1 and launched on a prior date for licensees that were selected for the 2020 CE audit.

Licensees have the ability to report completed continuing education and upload required documents through CE Broker. Individual nurses can easily track the number of CEs reported and remaining requirements. Items reported must be accurate and the documents uploaded must meet regulatory requirements. The KBN will have immediate access to CEs reported and uploaded in the licensee's account to verify compliance when licensees are randomly audited.

When entering data and uploading documents within CE Broker, be advised that CE Broker does not review or verify all submissions for accuracy or compliance with relevant continuing education requirements. Such verification only occurs when and if an individual licensee is selected for a CE audit and the entries and uploaded items are reviewed by Board staff. It is the responsibility of each licensee to upload and report CE information accurately, to comply with applicable CE requirements, and to maintain all CE records for a period of at least five (5) years.

CE Broker offers licensees three plans that provide a variety of services; however, CE Broker's Basic account is offered for free and is

the only one needed to report and upload CEs. Activate your CE Broker account at <https://cebroker.com/ky/plans>.

Before reporting and uploading documents to CE Broker:

- Review CE requirements and documents needed at <https://kbn.ky.gov/ce/Pages/default.aspx>; and
- Review each document to ensure it is complete and accurate. Follow the prompts in CE Broker to ensure each document is submitted correctly. *Do not submit multiple copies of the same document.

MICHELLE GARY holds a Bachelor's degree in Sociology and an Associate's degree in Paralegal Studies. She worked at the Kentucky Real Estate Commission for 21 years until she transferred to the KBN in 2017. Michelle is most commonly contacted by CE providers and licensees with questions about CE requirements. Michelle also serves as an assistant to the Practice Consultants with the Practice Committee, APRN Advisory Council, Dialysis Technician Advisory Council, and Certified Professional Midwives Advisory Council.

CE Compliance Audit

Michelle Rudovich, JD
Deputy Executive Director

Pursuant to 201 KAR 20:215, a nurse is responsible for maintaining records of CE compliance for a period of five years following the current licensure period. Each year, the Kentucky Board of Nursing (KBN) conducts an audit to ensure compliance with CE requirements. If a nurse is selected for an audit, the nurse will receive written notification that will be sent to the address on record with the Board. It is important that a nurse selected for audit promptly comply with the instructions provided in the letter.

If selected for an audit, the nurse will have twenty days to provide a copy of the requested records to the Board. If the nurse fails to comply with the continuing competency requirements the nurse shall be allowed to correct the non-compliance if the nurse meets the continuing competency requirements within thirty days of notification of noncompliance and enters a consent decree with the Board pursuant to 201 KAR 20:161, §2(5) within ten days of notification by the Board.

The Board shall issue a complaint pursuant to 201 KAR 20:161 if the nurse fails to furnish records as requested or there is evidence of fraud or deceit in procuring or attempting to procure a license to practice nursing.

During fiscal year 2019-2020, an audit was conducted that reviewed the CE records of 856 nurses (LPN: 124, RN: 639, APRN: 87, SANE: 6). KBN received 808 responses to the audit, a ninety-four (94%) response rate. Six hundred eighty-eight (688) of the total number of individuals audited were approved for compliance, an eighty percent (80%) compliance rate of the total audited. A total of one hundred

twenty (120) nurses who submitted documents for the 2019 CE audit were deemed to be non-compliant for the November 1, 2019 – October 31, 2020 earning period. Forty-eight (48) of the nurses selected for the audit failed to respond to requests for submission of proof of completion of continuing competency requirements.

Regulations Referenced:

201 KAR 20:215. Continuing Competency Requirements.
<https://apps.legislature.ky.gov/Law/KAR/201/020/215.pdf>

201 KAR 20:161. Investigation and disposition of complaints. <https://apps.legislature.ky.gov/law/kar/201/020/161.pdf>

MICHELLE GRANT RUDOVICH joined the KBN in March 2020 as Deputy Executive Director. Prior to joining the Board she served as the Director of Program Integrity for the Department for Medicaid Services and as the Director of the Office of Medicaid Fraud and Abuse, Kentucky Office of the Attorney General. Ms. Rudovich previously taught Negotiations as an adjunct professor at the Brandeis College of Law, University of Louisville.

Additional APRN CE Requirements - 2021 Earning Period 11/1/2020 – 10/31/2021

Michelle Gary
CE Coordinator

Beginning with the 2021 earning period of 11/1/2020 – 10/31/2021, APRNs who have a DEA-X registration are required to complete a total of four (4) contact hours annually in addiction disorders, which shall include 1.5 hours in addiction disorder pharmacology CE, pursuant to 201 KAR 20:065 (Professional standards for prescribing Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone by APRNs for medication assisted treatment for opioid use disorder), effective 11/19/2020.

Continuing education requirements for all Kentucky APRNs are listed below.

APRN Continuing Education Requirements

- **14 Contact Hours:** An APRN's board certification satisfies the fourteen (14) contact hour requirement needed for RN licensure renewal (national certification), as long as the APRN certification was initially attained during the licensure period, has been in effect during the entire licensure period, or has been renewed during the licensure period. If these requirements are met, APRNs do not need to earn 14 contact hours of CE to renew their RN licenses.
- **Pharmacology CE:** Five (5) contact hours of approved pharmacology CE must be earned by all APRNs each licensure period. CE certificates should reflect specific pharmacology contact hours awarded. To qualify as pharmacology, content shall include drug-specific information, safe prescribing practices, safe medication administration, prescribing methodologies, new regulations, or similar topics. Objectives for the contact hours related to pharmacology shall be identified. Casual mention of medications or medical treatments shall not qualify.
- **APRNs with a CAPA-CS:** Pursuant to 201 KAR 20:215(5)(b), of the five (5) approved pharmacology contact hours required for APRN licensure renewal, one and one-half (1.5) of these approved contact hours must be on the use of KASPER, pain management, or addiction disorders each licensure period. These hours may count as part of the required

five (5) pharmacology contact hours.

- APRNs with a DEA-X Registration: Pursuant to 201 KAR 20:065, an APRN who has obtained a DEA-X registration shall complete a total of four (4) contact hours annually in addiction disorders, which shall include 1.5 hours in addiction disorder pharmacology CE. The same CE certificates may be applied to all three of the requirements listed above.

In addition to the standard methods of CE approval, APRNs are allowed to use continuing medical education (CME) credits for pharmacology (provided the credits are pharmacology-related), if the provider offering the course is recognized by their national certifying organization (e.g. AANP, ANCC, etc.)

Additional information on continuing education requirements is available on the KBN website (www.kbn.ky.gov).

If you have any questions, please contact Michelle Gary, Practice Assistant and Continuing Competency Coordinator at michellea.gary@ky.gov.

Regulations Referenced:

- 201 KAR 20:065. Professional standards for prescribing Buprenorphine-Mono-Product or Buprenorphine-Combined-with-Naloxone by APRNs for medication assisted treatment for opioid use disorder. <https://apps.legislature.ky.gov/law/kar/201/020/065.pdf>
- 201 KAR 20:215. Continuing competency requirements. <https://apps.legislature.ky.gov/law/kar/201/020/215.pdf>

MICHELLE GARY holds a Bachelor's degree in Sociology and an Associate's degree in Paralegal Studies. She worked at the Kentucky Real Estate Commission for 21 years until she transferred to the KBN in 2017. Michelle is most commonly contacted by CE providers and licensees with questions about CE requirements. Michelle also serves as an assistant to the Practice Consultants with the Practice Committee, APRN Advisory Council, Dialysis Technician Advisory Council, and Certified Professional Midwives Advisory Council.

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Continuing Competency/ Continuing Education Frequently Asked Questions



Q: What are the dates of the continuing education earning period for renewal of my nursing license?

A: November 1st through October 31st.

Q: How many continuing education contact hours do I need to earn?

A: LPNs and RNs must earn fourteen (14) contact hours (or the equivalent – see below for more information) of approved continuing education each year to renew their licenses. APRNs and SANE nurses have additional CE requirements.

Equivalencies for fourteen (14) contact hours:

- Proof of earning seven (7) approved contact hours, PLUS a nursing employment evaluation that is satisfactory for continued employment. A copy of the evaluation must be signed by the supervisor and must include the employer's name, address, and phone number, and cover at least six (6) months of the earning period, as well submit the KBN Nursing Employment Evaluation, which is located on the KBN website Form; OR
- Successful completion of a postlicensure academic course at a college, university, or postsecondary vocational institution. The course must be beyond the prelicensure curriculum and relevant to nursing practice (i.e. nursing course designated by nursing course number) or applicable to the nurses role. It must have been completed and a grade of "C" or higher or "Pass" on a pass-fail grading system awarded during the earning period. One (1) semester credit hour is equal to 15 contact hours. One (1) quarter hour is equal to 12 contact hours. OR
- National certification related to the nurse's practice role (in effect during the entire period, or initially earned or recertified during the period); OR
- Participation as a preceptor for at least one nursing student or new employee. Must be for at least 120 hours, have a one-to-one relationship with student or employee, may precept more than one student during the 120 hours, and preceptorship shall be evidenced by written documentation from the educational institution or preceptor's supervisor;

- Completion of a nursing research project as principal investigator, coinvestigator, or project director. Must be qualitative or quantitative in nature, utilize research methodology, and increase knowledge resulting in improved outcomes or changes in behavior. Submissions must include a project abstract and a summary of the findings; OR
- Publication of an article in a peer-reviewed health-related journal. A copy of the article published during the earning period must be submitted; OR
- A nursing continuing education presentation that is developed by the presenter, presented to nurses or other health professionals, and is evidenced by a program brochure, course syllabi, or a letter from the offering provider identifying the licensee as the presenter of the offering. The number of contact hours earned shall be twice the number of contact hours offered to presentation attendees.

Q: Who is approved/accepted by KBN to offer CE?

A: KBN accepts CE offerings from three types of providers:

- CE Providers approved by KBN;
- Providers approved by another state board of nursing; and
- Providers approved by recognized national nursing organizations. (Review approval/accreditation information for the provider and the specific offering prior to registering. A list of the recognized national nursing organizations can be found on the KBN website.)

******In the most recent audit, several completion certificates submitted did not include information on who the providership was approved by to offer nursing continuing education, and could not be accepted. Some providers who are approved to offer nursing continuing education also provide training courses that are not applicable to KBN continuing education requirements. Review each completion certificate to verify that the following required items are included.

Completion certificates must include the following items:

- Licensee's Name;

- Date of completion;
- Number of contact hours awarded;
- Provider information; and
- Who the provider is approved by to offer nursing continuing education.

Q: What are the specific CE requirements for an APRN license renewal?

A: See the article *Additional APRN Continuing Education Requirements – 2021 Earning Period 11/1/2020 – 10/31/2021* for additional information.

Q: Does an APRN have to complete a total of 19 contact hours of CE?

A: No. APRNs may use their national APRN nursing certification to satisfy the fourteen (14) CE contact hours needed for RN licensure renewal each year, as long as the certification was initially attained during the licensure period, has been in effect during the entire licensure period, or has been renewed during the licensure period. If these requirements are met, APRNs do not need to earn fourteen (14) additional contact hours of CE to renew their RN licenses.

Q: What are the specific CE requirements for a SANE credential renewal?

A: Five (5) contact hours of approved sexual assault CE, which can include forensic medicine or domestic violence. These hours may count as part of the required fourteen (14) contact hours for RN renewal.

Q: Is there a requirement to earn CE in Pediatric Abusive Head Trauma and who is required to complete it?

A: There is a one-time content specific requirement for nurses to earn one and one-half (1.5) CE contact hours in Pediatric Abusive Head Trauma (Shaken Baby Syndrome). Nurses who obtained their education from a program of nursing outside of Kentucky and nurses who graduated from a Kentucky program prior to December of 2011, must complete this course within the first three (3) years of licensure.

Q: Is there a requirement to earn CE in Domestic Violence and who is required to complete it?

Continued on page 14>>

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A: There is a one-time content specific requirement for nurses to earn three (3) CE contact hours in Domestic Violence. Individuals who obtained their education from a program of nursing outside of Kentucky and nurses who graduated from a Kentucky program prior to May 1998, must complete this course within the first three (3) years of licensure.

Q: Is there a requirement to earn CE in LPN Infusion Therapy and who is required to complete it?

A: There is a one-time content specific requirement for LPNs who were admitted to a prelicensure program of nursing prior to September 15, 2019 to complete prior to performing infusion therapy.

Q: Am I exempt from earning CE contact hours for my first renewal?

A: No. There is no exemption for a first time renewal. Individuals who obtain their license prior to May 1st of the earning period are required to complete continuing education for the earning period.

Q: Do college courses count as CE hours?

A: Yes, but the course must be:

- A nursing course, designated by a nursing course number, or an academic course that is applicable to the nurse's role;
- Earned beyond the completion of the prelicensure curriculum of the license; and
- Successfully completed (a grade of "C" or better or a "pass" on a pass-fail grading system) during the earning period.

One semester credit hour equals fifteen (15) contact hours. One quarter credit hour equals twelve (12) contact hours.

Q: Can a nurse substitute CME credits for nursing contact hours?

A: Not automatically. A nurse can have the hours reviewed for possible conversion into nursing continuing education contact hours by submitting an Individual Review Application. This form can be found on the KBN website. There is a non-refundable fee of \$10.00 and the completed application, with all supporting documentation, must be received no later than November 30th following the end of the earning period.

APRNs are allowed to use CME credits for pharmacology continuing education, if the provider offering the course is recognized by their national certifying organization.

Q: I have attended a CE course that is not offered by an approved CE provider. Can I apply for approval of the hours

earned for the offering?

A: You can have the hours reviewed for nursing continuing education contact hours by submitting an Individual Review Application. This form can be found on the KBN website. There is a non-refundable fee of \$10.00 and the completed application, with all supporting documentation, must be received by the November 30th following the earning period.

Q: What cannot be accepted as CE?

A: The following are not accepted for CE:

- CPR or BLS Classes;
- ACLS and PALS Certification/Cards*;
- Nurse Aide Training;
- Inservice, On the Job, Orientation, and/or Staff Development Training designed to provide information related to the work setting;
- Equipment Demonstration; or
- Prelicensure general education or elective courses.

This list is provided as an example of courses that cannot be accepted as CEs and not a complete list.

*Although ACLS and PALS certificates are not counted as national certification, if an approved provider offers the ACLS or PALS courses, the contact hours earned will be accepted by KBN. If audited, you must provide the certificate of completion awarding contact hours; the certification card alone is not sufficient.

Q: Will I receive an audit notice?

A: The audit is a random selection of nurses from the KBN database. If selected for the audit you will receive a notice. Be sure to keep your email and mailing address up to date in the KBN database. During the audit, nurses must submit proof of completion through CE Broker. Items submitted in CE Broker during the audit will be reviewed to determine if a nurse is in compliance with CE requirements. If the items submitted are incorrect or incomplete, a request for additional documents will be sent to the nurse via email.

Q: What will happen if I do not complete the required contact hours?

A: You will be required to complete the required hours and submit copies of the CE certificates to KBN, along with a letter explaining why these hours were earned late. Once this documentation is received, if accepted by KBN, you may be eligible to enter into a Consent Decree with KBN and pay the civil penalty. If you do not earn the contact hours or pay the civil penalty, your records will be forwarded to the Investigation Branch for initiation of a complaint

and possible disciplinary action.

Q: I am no longer employed as a nurse and do not plan to work as a nurse, but want to renew my nursing license, do I need to complete nursing CE?

A: Yes. Continuing education is required to renew a license, regardless of employment status.

Q: I have earned more CE contact hours this earning period than I need. Can these contact hours be used for my next renewal?

A: No. CE contact hours cannot be carried over to the next earning period. All fourteen (14) contact hours must be earned within the specified earning period (November 1st - October 31st).

Q: Does KBN have a record of the CE hours I have earned?

A: No. KBN does not keep track of each nurse's CE contact hours. Nurses should retain records of their CE/competency for at least five (5) years following a licensure period.

Additional information on CE requirements may be found in the CE Brochure at <https://kbn.ky.gov/ce/Documents/CE%20Brochure%202020-2021.pdf>. Email Michelle Gary at michellea.gary@ky.gov with any additional questions regarding CE requirements.

Q: Can Kentucky nurses use CE Broker to record their CEs?

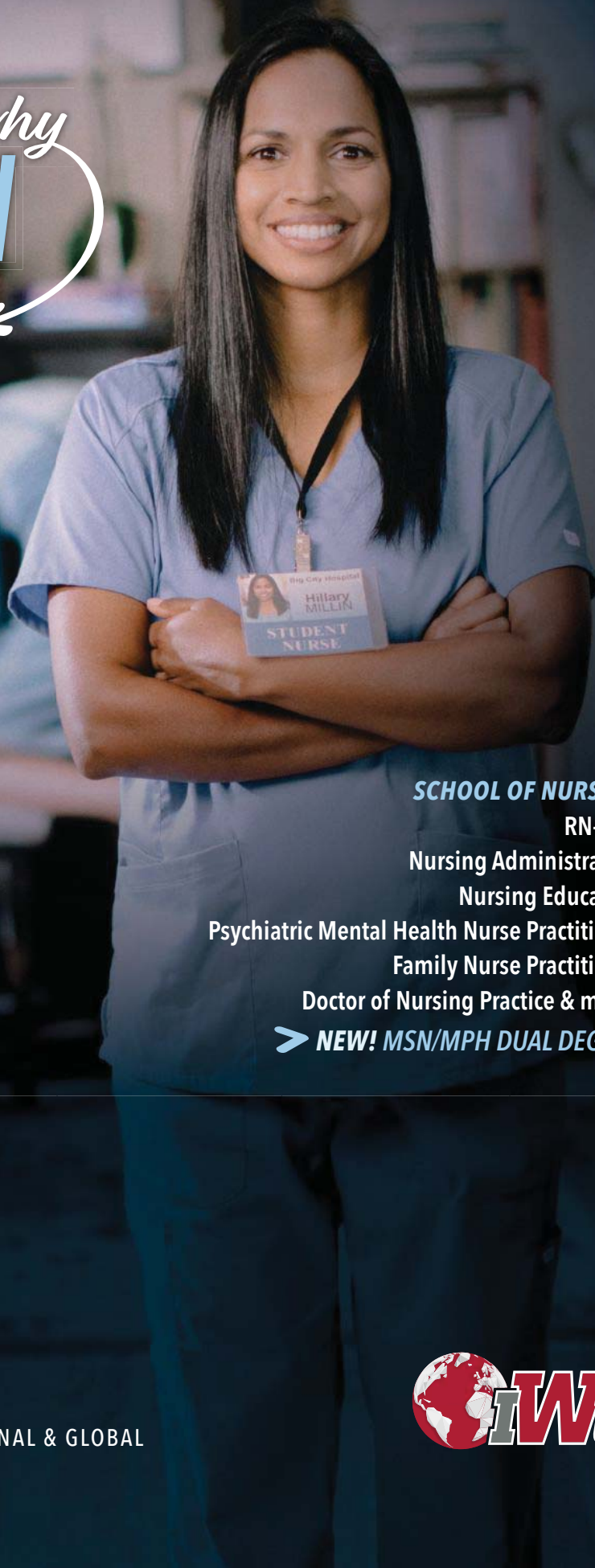
A: Yes! As of March 1, 2021 CE Broker is available to Kentucky nurses. See the articles in this edition of the *KBN Connection* for additional information.

Questions about CE Broker?

If you have questions regarding your CE Broker account, reporting, uploads/attachments, errors, or the CE tracking system, please contact CE Broker experts at the CE Broker Support Center Monday - Friday 8:00 am - 8:00 pm ET via phone at (877) 434-6323 or via email at support@cebroker.com.

If you have questions about CE requirements, email Michelle Gary at MichelleA.Gary@ky.gov.

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Summary of 2021 Changes to Kentucky Revised Statutes Chapter 314

Morgan G. Ransdell, JD
General Counsel

On March 25, 2021, the Kentucky Board of Nursing (KBN) housekeeping legislation, House Bill 202, was signed into law. It will take effect on June 30, 2021, which is the 90th day following the end of the 2021 General Assembly Regular Session. See, <https://apps.legislature.ky.gov/recorddocuments/bill/21RS/hb202/bill.pdf>.

The most significant change for KBN licensees is the new requirement that all licensees maintain an email address of record with KBN. For nurses, an email address may be provided or updated online via the KBN website: <https://kbn.ky.gov/apply/Pages/addchg.aspx>. For certified professional midwives and dialysis technicians, an email address may be provided or updated by completing a paper form that is obtained from the KBN website. In addition to requiring that KBN licensees notify KBN of a current and active email address, HB 202 also authorizes KBN to enact regulations that provide for electronic submission of documents. Another change implemented by HB 202 was the addition of dialysis technicians (DTs) and certified professional midwives (LCPMs) to the statute that sets out the Board's public protection mission, KRS 314.021. While the Board has had jurisdiction over DTs and LCPMs, this change will allow the Board to update the KBN Mission Statement to be more inclusive of the three groups that are licensed or credentialed by the KBN. This statute also solidifies that all professions licensed or credentialed by KBN are accountable to make decisions in accordance with their educational preparation and experience, and are required to practice with reasonable skill and safety. In 2001, with the passage of HB184, KBN was authorized to license and regulate DTs. In 2019, with the passage of SB84, KBN was authorized to license and regulate LCPMs. By including DTs and LCPMs in KRS 314.021, the revisions provide a more accurate statement of the KBN mission and of the responsibilities of all KBN licensees, including DTs and LCPMs.

Another change harmonized KRS 314.042(10)(k) with KRS 218A.202(2), by requiring that all APRNs with a DEA number obtain and maintain an active KASPER master account, whether or not they authorize controlled substance prescriptions. All APRNs with a DEA

number, even those who do not prescribe controlled substances, are required to review a prescriber KASPER report no less than once every six (6) months, and to take additional action regarding any incorrect information included in the report. See, 201 KAR 20:057 §9(13) (requiring reporting of incorrect information to the pharmacy, and reporting possible fraudulent activity to law enforcement or the Drug Enforcement Professional Practices Branch, Office of Inspector General, Cabinet for Health and Family Services).

The final substantive change implemented in HB 202 was the elimination of the Collaborative Prescribing Agreement Joint Advisory Committee, referred to here as the CAPA-NS Committee. This committee has been inactive for many years, and the task of assisting APRNs who are seeking physicians with whom to collaborate with regard to the prescribing of nonscheduled legend drugs has been effectively performed by the APRN Council and the largest APRN professional association in Kentucky, the Kentucky Association of Nurse Practitioners and Nurse Midwives. It is noted that, in 2018, with the passage of HB 427 (2018), APRNs with four years of experience prescribing nonscheduled legend drugs with a CAPA-NS agreement were exempted from further CAPA-NS requirements, provided they are in good standing with KBN.

Questions regarding HB 202 (2021) may be directed to Morgan G. Ransdell, KBN General Counsel, morgan.ransdell@ky.gov.

MORGAN G. RANSDALL is General Counsel of the Kentucky Board of Nursing. Previously, he served as a Staff Attorney Supervisor and Staff Attorney at KBN. He worked for twelve years as an attorney with the Kentucky Commission on Human Rights, and for five years as an attorney with the Kentucky Attorney General's Office. Mr. Ransdell holds a Juris Doctorate degree from the Vanderbilt University School of Law and a Bachelor's Degree from the University of Kentucky. During his twenty-seven years of legal practice, Mr. Ransdell has concentrated his practice in the areas of civil rights, employment law, and professional licensure litigation.

Kentucky ePrescribing Mandate: Where are we? An Update from the Drug Enforcement and Professional Practices Branch, OIG, CHFS

KASPER

Kentucky All Schedule Prescription Electronic Reporting



Office of Inspector General
Drug Enforcement and Professional Practices

Kentucky Revised Statute 218A.182 went into effect January 1, 2021 and mandates the electronic prescribing of controlled substances (EPCS) in Kentucky with some limited exceptions.

As of March 30, 2021 the Drug Enforcement and Professional Practices Branch has processed and approved 1,132 EPCS waivers to date.

Beginning in May 2021 the Drug Enforcement and Professional Practices Branch will begin auditing for compliance with the new EPCS mandate. The Kentucky Cabinet for Health and Family Services Office of Inspector General (OIG) encourages prescribers to adopt the EPCS standard as soon as possible to comply with the Kentucky

mandate and prepare for compliance with the federal mandate. If your Electronic Health Record (EHR) system is not currently EPCS certified, you should contact your EHR vendor to determine how to implement EPCS capability. Providers without electronic records can find stand-alone software, available at minimal to no cost, for EPCS using a

computer, tablet or smartphone.

If you are not currently compliant with this mandate and are unable to comply, please petition the OIG for a temporary waiver by submitting a completed Temporary Exemption Form.¹ Additional information regarding EPCS requirements and waivers from the EPCS mandate are contained on the Cabinet's website and in state regulation 902 KAR 55:130.

¹Available at <https://chfs.ky.gov/agencies/os/oig/dai/deppb/Pages/default.aspx>

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Summary of COVID-19 Emergency Measures and Recent or Pending Regulatory Changes

Morgan G. Ransdell, JD
General Counsel

The following information is being provided as a summary of KBN COVID-19 emergency measures and recent or pending regulatory changes, as of April 29, 2021. The status of the statutory and regulatory provisions cited below should be verified on the Kentucky Legislative Research Commission website. <https://apps.legislature.ky.gov/law/statutes/chapter.aspx?id=38813> (statutes), <https://apps.legislature.ky.gov/law/kar/TITLE201.HTM> (regulations)

Changes Implemented Through Active Emergency Memoranda

CAPA-CS & CAPA-NS Requirements Suspended – On March 31, 2020, CAPA-CS and CAPA-NS collaborative agreement requirements related to APRN prescribing of controlled and non-controlled substances were suspended for the duration of the COVID-19 state of emergency, and for a thirty (30) day grace period thereafter. This change to KRS 314.042(8, 10) and 201 KAR 20:057 §7 was necessary to ensure patient access to care, expansion of telehealth, and recognition of out-of-state APRN practice authority during the global pandemic. The Board also temporarily suspended the one year waiting period during which newly licensed APRNs were previously required to refrain from prescribing controlled substances. It is not known when the COVID-19 state of emergency will end.

Integrated Practicum Modified for Students in RN and LPN Prelicensure Education Programs – During the state of emergency, the 120 hour integrated practicum is not confined to a concentrated period of seven (7) consecutive weeks. In addition, the fifty percent (50%) simulation cap has been suspended, and the practicum may be up to 100% simulation. These changes to 201 KAR 20:320 became effective on March 27, 2020, and will last for the duration of the COVID-19 state of emergency, and for thirty (30) days thereafter. In other words, the requirements of the regulation will take effect for all semesters or quarters that begin after the end of the grace period, with the exception that any semester or quarter that begins during the 30 days grace period following the date the state of emergency ends may operate under the emergency provisions.

Emergency Measures That Have Been Rescinded

Fingerprint-driven criminal background checks, NCLEX, and continuing education requirements for reinstatement applicants – Regulations were modified through memorandum to temporarily suspend the requirement for fingerprint-driven criminal background checks prior to licensure (APRN – 201 KAR 20:056), provisional licensure (RN and LPN exam applicants – 201 KAR 20:070), and temporary work permit (RN and LPN endorsement applicants – 201 KAR 20:110; RN, LPN, and APRN reinstatement applicants – 201 KAR 20:225, DT reinstatement applicants – 201 KAR 20:470; LCPM applicants – 201 KAR 20:620). Further, 201 KAR 20:225 was temporarily suspended as to the continuing competency requirements that were applicable to reinstatement applicants who were not subject to a disciplinary action.

On March 5, 2021, COVID-19 emergency measures related to fingerprint-driven criminal background checks, NCLEX, and continuing education requirements for reinstatement applicants were lifted by the Kentucky Board of Nursing, which reinstated pre-COVID-19 regulatory requirements. Senate Bill 150 §13 (2020) and multiple Executive Orders of Governor Andy Beshear authorized the Kentucky Board of Nursing to modify statutory and regulatory provisions to eliminate barriers to licensure caused by social distancing requirements and to ensure the continuation of Board support of Life-Sustaining Businesses. Consistent with this authority, the Kentucky Board of Nursing temporarily modified numerous regulations within 201 KAR Chapter 20 for the primary purpose of allowing an expeditious pathway to temporary licensure notwithstanding delays in obtaining fingerprint-driven criminal background reports and with regard to the NCLEX examination. As delays associated with fingerprint-driven criminal background checks and the NCLEX examination have been largely eliminated, on February 18, 2021, KBN decided to seek to rescind these COVID-19 emergency measures. This action took effect on March 5, 2021, after being approved by the Secretary of the Governor's Executive Cabinet.

Effective March 5, 2021, no new applications for initial licensure, endorsement, or reinstatement were processed under the emergency procedures. In addition, applicants who had applications filed and pending on March 5, 2021, but which had not yet been processed, were notified by email of the requirements to be met. In addition, Board staff notified all provisional or temporary license holders by email of the withdrawal of the emergency modifications to 201 KAR 20:056, 201 KAR 20:070, 201 KAR 20:110, 201 KAR 20:225, 201 KAR 20:470, and 201 KAR 20:620, the corresponding reinstatement of NCLEX and fingerprint-driven criminal background check requirements, and the date that their license, provisional license, or temporary work permit will expire if those requirements are not met. It is noted that provisional and temporary licenses expire on varying dates; more specifically, a date six (6) months after the provisional license/temporary work permit was issued or renewed, whichever occurred later. As of April 5, 2021, all provisional license and temporary work permit expiration dates are binding, and all applicants for reinstatement will be required to satisfy continuing competency requirements.

Administrative Regulations

201KAR 20:065 – Professional standards for prescribing Buprenorphine-MonoProduct or Buprenorphine-Combined-with-Naloxone by APRNs for medication assisted treatment (“MAT”) for opioid use disorder. The Board approved amendments to this administrative regulation on April 16, 2020. This regulation was on the August 11, 2020, ARRS meeting agenda. At the October 15, 2020, Board meeting, the Board modified the proposed amendments in light of stakeholder input. The revised amendments took effect on October 28, 2020. Subsequently, the APRN Council met on November 2, 2020, and again on December 1, 2020. At the December 1, 2020, meeting, the APRN Council identified additional proposed amendments

that were recommended for adoption at the Board meeting on December 17, 2020. The changes are as follows:

- abolishes the mental health evaluation requirement, which brings the regulation into greater harmony with 201 KAR 9:270;
- relaxes the regulation requirement as to who may serve as a mental health counselor for an APRN's opioid use disorder patients, which will bring the regulation into greater harmony with 201 KAR 9:270, and which will allow other licensed professionals such as LCADCs and CADCs to participate in the implementation of objective behavioral modification;
- provides a definition of consultation which clarifies the APRNs regulatory obligations when prescribing Buprenorphine in three (3) contexts: (i) in conjunction with other sedative hypnotics, stimulants or other opioids; (ii) when prescribing Buprenorphine to pregnant/breastfeeding patients; (iii) when prescribing a daily dose of greater than sixteen (16) mg daily dose of buprenorphine on an ongoing basis;
- requires that laboratory test results be completed and reviewed within thirty (30) days of induction, instead of prior to induction;
- requires patient consent for the release of prior medical records to be obtained within thirty (30) days of induction;
- requires a pregnancy test recommendation, but only as to female patients of child bearing age and ability, which brings the regulation into greater harmony with 201 KAR 9:270;
- relaxes the obstetrical consult requirement for pregnant or breastfeeding patients by, among other things, allowing the patient to decline the consult;
- reduces the number of drug/alcohol screens that specifically test for gabapentin and alcohol from eight (8) each year to two (2) each year;
- brings the regulation into conformity with 201 KAR 20:057 §9(5) by requiring a review of patient KASPER data every 90 days, instead of at every visit;
- modifies the objective behavioral modification requirement to bring the regulation into greater harmony with 201 KAR 9:270; and
- provides instructions on what a buprenorphine prescriber should do when the prescriber determines that is necessary and appropriate to deviate from the requirements of the regulation in the treatment of an opioid use disorder patient.

The proposed revisions were filed with the Legislative Research Commission and are pending.

201 KAR 20:085 – Licensure periods and miscellaneous requirements. The Board approved amendments to this administrative regulation took effect on December 15, 2020.

Continued on page 20>>

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The amendments: (1) require all KBN licensees to notify KBN of an email address; and (2) specify that the email address will be exempt from disclosure under the Kentucky Open Records Act. This regulation is being reviewed by staff for further amendments to clarify the expiration date for applications. 201 KAR 20:110 – Licensure by endorsement. The Board approved amendments to this administrative regulation became effective on September 23, 2020. This regulation is being reviewed by staff for further amendments to clarify the expiration date for applications.

201 KAR 20:370 – Applications for Licensure. On February 18, 2021, the Board ratified the February 15, 2021, authorization for the filing of amended renewal applications. The changes include: “Verification of primary state of residence may be required” where PSOR question is present; “Traffic misdemeanors, other than DUI, should not be reported;” remove KHEAA sentence from attestation; added “branch of active duty service” where military question is present; require entry of current mailing address each year; and change date to 2/2021. The revised applications were filed with the Legislative Research Commission and are pending.

201 KAR 20:390 – Nursing Incentive Scholarship Fund. This regulation was amended effective February 3, 2021. The amendments: (1) change the scholarship criteria to heighten the emphasis on financial need, as established by the estimated Federal Expected Family Contribution (EFC) as calculated by the annual FAFSA; (2) remove healthcare experience from being a factor in award determinations; (3) allow for collection of amounts owed by a third party collector in cases of breach or default; and (4) to specify that deferment or method of curing default shall not be available after referral of the debt to a third party collector. Revisions to NISF application forms and other material incorporated by reference are currently being reviewed by staff.

201 KAR 20:411 – Sexual Assault Nurse Examiner Program standards and credential requirements. On February 18, 2021, the Board ratified the February 15, 2021, authorization for the filing of an amended SANE renewal application form. The revised applications were filed with the Legislative Research Commission and are pending.

201 KAR 20:470 – Dialysis technician credentialing requirements and training program standards. On November 5, 2020, the Dialysis Technician Council began

reviewing 201 KAR 20:470, with the goal of repealing it and replacing it with four new regulations: 201 KAR 20:472 (Initial approval for dialysis technician training programs); 201 KAR 20:474 (Continuing approval and periodic evaluation of dialysis technician training programs); 201 KAR 20:476 (Dialysis technician credentialing requirements for initial, renewal, and reinstatement); and 201 KAR 20:478 (Dialysis technician scope of practice, discipline, and miscellaneous requirements). On April 5, 2021, the Dialysis Technician Council voted to recommend adoption of these new regulations, as well as modified material incorporated by reference. This recommendation was considered by the Board on April 15, 2021 and approved. The filing of the regulations with the LRC Regulations Compiler will occur in the near future.

201 KAR 20:506 – Nurse Licensure Compact. While no substantive changes to this regulation are proposed, modified material incorporated by reference was filed with the LRC Regulations Compiler. The changes pertain to The Interstate Commission of Nurse Licensure Compact Administrators, Final Rules as of January 1, 2021. This is pending.

201 KAR 20:660 – Licensed certified professional midwives duty to report. On December 2, 2020, the LCPM Advisory Council approved amendments to 201 KAR 20:660 that: (1) remove the requirement for reporting the outcome of all referrals; (2) provide for the confidentiality of LCPM incident reports and annual reports; (3) require the reporting of aggregate incident and annual report data that does not disclose confidential information; and (4) incorporate the new annual report form by reference. These revisions were approved by the Board on December 17, 2020. The proposed revisions were filed with the Legislative Research Commission and are pending.

MORGAN G. RANDELL is General Counsel of the Kentucky Board of Nursing. Previously, he served as a Staff Attorney Supervisor and Staff Attorney at KBN. He worked for twelve years as an attorney with the Kentucky Commission on Human Rights, and for five years as an attorney with the Kentucky Attorney General's Office. Mr. Randsell holds a Juris Doctorate degree from the Vanderbilt University School of Law and a Bachelor's Degree from the University of Kentucky. During his twenty-seven years of legal practice, Mr. Randsell has concentrated his practice in the areas of civil rights, employment law, and professional licensure litigation.

NURSE LICENSE HOLDERS WITH A PRIMARY STATE OF RESIDENCE (PSOR) OUTSIDE KENTUCKY

The RN/LPN/APRN/SANE renewal period will be open from September 15-October 31, 2021. If Kentucky is not your primary state of residence and you declare another compact state as your primary state of residence, please check your license now to see if you have a single state license or a compact, multi-state license. If you hold a single state license from a compact state other than Kentucky during the renewal period, you will not be able to renew your LPN or RN in Kentucky. You need to begin the process now to convert it to a compact multi-state license.

For example, Indiana is a compact state. If you declare Indiana as a your primary state of residence you will need to obtain your compact license before October 31 to work in Kentucky as an LPN or RN on November 1.

An exception will be granted for licensees who wish to renew in Kentucky and who hold a single state license in a compact state because they are ineligible for a compact multi-state license. To determine if you meet the eligibility requirements for a compact multi-state license visit https://www.ncsbn.org/NLC_ULRs.pdf. For a current list of compact states or for additional information about the NLC visit <https://www.ncsbn.org/nurse-licensure-compact.htm>.

Please note there is not an APRN Compact; therefore, all APRNs licensed in Kentucky will need to renew their APRN license even if they declare a primary state of residence outside Kentucky.